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| <b>AMENDMENT TRANSMITTAL LETTER</b><br>LNG form  |                                  |                         |                                    | Docket No.<br>53199.US |                           |             |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
|--|----------------------------------|-------------------------|------------------------------------|------------------------|---------------------------|-------------|--|-----|-----|-----|--|--|--|--|----------------------------------|--|------------------------------------|----------------------|------|-----|--------------|------|-------|-------|---|---------------|-------------|--------------------|-----|-------|-------|---|---------------|----------|-----------------------------|--|--|--|--|--------------|--|--|--|--|--|--|--------------|-------------|--|--|--|--|--|---------------------------|-----------|
| Application No.<br>09/685,317  | Filing Date<br>10/10/2000        | Examiner<br>Lau, Tung S |                                    | Group Art Unit<br>2863 |                           |             |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| Invention Title<br>Accelerometer Based Angular Position Sensor   |                                  |                         |                                    |                        |                           |             |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| <b>TO THE ASSISTANT COMMISSIONER FOR PATENTS</b><br>Transmitted herewith is an amendment in the above-identified application.<br><br><input type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.<br><br><input type="checkbox"/> A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed.<br><br><input checked="" type="checkbox"/> No additional fee is required.<br><br><input type="checkbox"/> The fee has been calculated as shown below:<br><br><b>CLAIMS AS AMENDED</b><br><table border="1"><thead><tr><th></th><th>(1)</th><th>(2)</th><th>(3)</th><th></th><th></th><th></th></tr><tr><th></th><th>CLAIMS REMAINING AFTER AMENDMENT</th><th></th><th>HIGHEST NUMBER PREVIOUSLY PAID FOR</th><th>PRESENT NUMBER EXTRA</th><th>RATE</th><th>FEE</th></tr></thead><tbody><tr><td>TOTAL CLAIMS</td><td>* 10</td><td>minus</td><td>** 25</td><td>0</td><td><b>x \$18</b></td><td><b>\$ 0</b></td></tr><tr><td>INDEPENDENT CLAIMS</td><td>* 4</td><td>minus</td><td>*** 6</td><td>0</td><td><b>x \$86</b></td><td><b>0</b></td></tr><tr><td>MULT. DEPENDENT CLAIM ADDED</td><td colspan="4"></td><td><b>\$290</b></td><td></td></tr><tr><td colspan="5"></td><td><b>TOTAL</b></td><td><b>\$ 0</b></td></tr><tr><td colspan="5">If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.</td><td><b>SMALL ENTITY TOTAL</b></td><td><b>\$</b></td></tr></tbody></table> <p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.<br/>** If the highest number previously paid for IN THIS SPACE is less than 20, enter "20".<br/>*** If the highest number previously paid for IN THIS SPACE is less than 3, enter "3".<br/>The "highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1.</p><br><input type="checkbox"/> Please charge Deposit Account No. 12-2355 in the amount of \$ _____. A duplicate copy of this sheet is enclosed.<br><br><input type="checkbox"/> A check in the amount of \$ to cover the filing fee is enclosed.<br><br><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-2355. <b>A duplicate copy of this sheet is enclosed.</b><br><input checked="" type="checkbox"/> Any additional filing fees required under 37 CFR 1.16.<br><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. |                                  |                         |                                    |                        |                           |             |  | (1) | (2) | (3) |  |  |  |  | CLAIMS REMAINING AFTER AMENDMENT |  | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT NUMBER EXTRA | RATE | FEE | TOTAL CLAIMS | * 10 | minus | ** 25 | 0 | <b>x \$18</b> | <b>\$ 0</b> | INDEPENDENT CLAIMS | * 4 | minus | *** 6 | 0 | <b>x \$86</b> | <b>0</b> | MULT. DEPENDENT CLAIM ADDED |  |  |  |  | <b>\$290</b> |  |  |  |  |  |  | <b>TOTAL</b> | <b>\$ 0</b> | If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here. |  |  |  |  | <b>SMALL ENTITY TOTAL</b> | <b>\$</b> |
|  | (1)                              | (2)                     | (3)                                |                        |                           |             |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
|  | CLAIMS REMAINING AFTER AMENDMENT |                         | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT NUMBER EXTRA   | RATE                      | FEE         |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| TOTAL CLAIMS   | * 10                             | minus                   | ** 25                              | 0                      | <b>x \$18</b>             | <b>\$ 0</b> |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| INDEPENDENT CLAIMS   | * 4                              | minus                   | *** 6                              | 0                      | <b>x \$86</b>             | <b>0</b>    |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| MULT. DEPENDENT CLAIM ADDED  |                                  |                         |                                    |                        | <b>\$290</b>              |             |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
|  |                                  |                         |                                    |                        | <b>TOTAL</b>              | <b>\$ 0</b> |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.   |                                  |                         |                                    |                        | <b>SMALL ENTITY TOTAL</b> | <b>\$</b>   |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |
| <div style="text-align: right;"><br/>_____<br/>Andrew S. Neely, Reg. No. 28,979</div>  |                                  |                         |                                    |                        |                           |             |  |     |     |     |  |  |  |  |                                  |  |                                    |                      |      |     |              |      |       |       |   |               |             |                    |     |       |       |   |               |          |                             |  |  |  |  |              |  |  |  |  |  |  |              |             |  |  |  |  |  |                           |           |

Form LNG (9/96)

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\*\*\* CERTIFICATE OF MAILING \*\*\*

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on January 6, 2004  
Date

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Andrew S. Neely 28,979